

Fill in this information to identify your case:

Debtor 1 Samuel Ostroff

First Name	Middle Name	Last Name

Debtor 2
(Spouse, if filing)

First Name	Middle Name	Last Name

United States Bankruptcy Court for the: New Hampshire

Case number 18-10301-BAH
(If known)

Official Form 427

Cover Sheet for Reaffirmation Agreement

12/15

Anyone who is a party to a reaffirmation agreement may fill out and file this form. Fill it out completely, attach it to the reaffirmation agreement, and file the documents within the time set under Bankruptcy Rule 4008.

Part 1: Explain the Repayment Terms of the Reaffirmation Agreement

1. Who is the creditor?	<u>Wyskiel, Boc, Tilinghast & Bolduc, P.A.</u> Name of the creditor										
2. How much is the debt?	On the date that the bankruptcy case is filed \$ _____ To be paid under the reaffirmation agreement \$ _____ \$ _____ per month for _____ months (if fixed interest rate)										
3. What is the Annual Percentage Rate (APR) of Interest? (See Bankruptcy Code § 524(k)(3)(E).)	Before the bankruptcy case was filed <u>0.00</u> % Under the reaffirmation agreement <u>0.00</u> % <input type="checkbox"/> Fixed rate <input checked="" type="checkbox"/> Adjustable rate										
4. Does collateral secure the debt?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Describe the collateral. <u>Potential award against Social Security Administration</u> Current market value \$ <u>48,000.00</u>										
5. Does the creditor assert that the debt is nondischargeable?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Attach an explanation of the nature of the debt and the basis for contending that the debt is nondischargeable.										
6. Using information from Schedule I: Your Income (Official Form 106I) and Schedule J: Your Expenses (Official Form 106J), fill in the amounts.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Income and expenses reported on Schedules I and J</th> <th style="width: 50%;">Income and expenses stated on the reaffirmation agreement</th> </tr> </thead> <tbody> <tr> <td>6a. Combined monthly income from line 12 of Schedule I \$ <u>6,238.80</u></td> <td>6e. Monthly income from all sources after payroll deductions \$ <u>6,238.80</u></td> </tr> <tr> <td>6b. Monthly expenses from line 22c of Schedule J \$ <u>4,716.08</u></td> <td>6f. Monthly expenses — \$ <u>4,716.08</u></td> </tr> <tr> <td>6c. Monthly payments on all reaffirmed debts not listed on Schedule J — \$ <u>0.00</u></td> <td>6g. Monthly payments on all reaffirmed debts not included in monthly expenses — \$ <u>0.00</u></td> </tr> <tr> <td>6d. Scheduled net monthly income \$ <u>1,522.72</u> Subtract lines 6b and 6c from 6a. If the total is less than 0, put the number in brackets.</td> <td>6h. Present net monthly income \$ <u>1,522.72</u> Subtract lines 6f and 6g from 6e. If the total is less than 0, put the number in brackets.</td> </tr> </tbody> </table>	Income and expenses reported on Schedules I and J	Income and expenses stated on the reaffirmation agreement	6a. Combined monthly income from line 12 of Schedule I \$ <u>6,238.80</u>	6e. Monthly income from all sources after payroll deductions \$ <u>6,238.80</u>	6b. Monthly expenses from line 22c of Schedule J \$ <u>4,716.08</u>	6f. Monthly expenses — \$ <u>4,716.08</u>	6c. Monthly payments on all reaffirmed debts not listed on Schedule J — \$ <u>0.00</u>	6g. Monthly payments on all reaffirmed debts not included in monthly expenses — \$ <u>0.00</u>	6d. Scheduled net monthly income \$ <u>1,522.72</u> Subtract lines 6b and 6c from 6a. If the total is less than 0, put the number in brackets.	6h. Present net monthly income \$ <u>1,522.72</u> Subtract lines 6f and 6g from 6e. If the total is less than 0, put the number in brackets.
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Debtor 1

First Name Middle Name Last Name

Case number (if known) 18-10301-BAH

7. Are the income amounts on lines 6a and 6e different?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	Explain why they are different and complete line 10. _____ _____
8. Are the expense amounts on lines 6b and 6f different?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	Explain why they are different and complete line 10. _____ _____
9. Is the net monthly income in line 6h less than 0?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	A presumption of hardship arises (unless the creditor is a credit union). Explain how the debtor will make monthly payments on the reaffirmed debt and pay other living expenses. Complete line 10. _____ _____
10. Debtor's certification about lines 7-9	I certify that each explanation on lines 7-9 is true and correct.	
If any answer on lines 7-9 is Yes, the debtor must sign here.	X	X
If all the answers on lines 7-9 are No, go to line 11.	Signature of Debtor 1	Signature of Debtor 2 (Spouse Only in a Joint Case)
11. Did an attorney represent the debtor in negotiating the reaffirmation agreement?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes.	Has the attorney executed a declaration or an affidavit to support the reaffirmation agreement? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 2: Sign Here

Whoever fills out this form must sign here. I certify that the attached agreement is a true and correct copy of the reaffirmation agreement between the parties identified on this *Cover Sheet for Reaffirmation Agreement*.

X /s/ Ryan M. Borden

Signature

Date 05/18/2018

MM / DD / YYYY

Ryan M. Borden, Esq.

Printed Name

Check one:

- ☒ Debtor or Debtor's Attorney
☐ Creditor or Creditor's Attorney

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☐ Presumption of Undue Hardship
☒ No Presumption of Undue Hardship
(Check box as directed in Part D: Debtor's Statement
in Support of Reaffirmation Agreement.)

UNITED STATES BANKRUPTCY COURT

District of New Hampshire

In re Samuel Ostroff,
Debtor

Case No. 18-10301-BAH
Chapter 7

REAFFIRMATION AGREEMENT

[Indicate all documents included in this filing by checking each applicable box.]

- | | |
|--|---|
| <input checked="" type="checkbox"/> Part A: Disclosures, Instructions, and
Notice to Debtor (pages 1 - 5) | <input checked="" type="checkbox"/> Part D: Debtor's Statement in
Support of Reaffirmation Agreement |
| <input checked="" type="checkbox"/> Part B: Reaffirmation Agreement | <input type="checkbox"/> Part E: Motion for Court Approval |
| <input checked="" type="checkbox"/> Part C: Certification by Debtor's Attorney | |

*[Note: Complete Part E only if debtor was not represented by an attorney during
the course of negotiating this agreement. Note also: If you complete Part E, you must
prepare and file Form 2400C ALT - Order on Reaffirmation Agreement.]*

Name of Creditor: Wyskiel, Boc, Tilinghast & Bolduc, P.A.

- ☐ *[Check this box if]* Creditor is a Credit Union as defined in §19(b)(1)(a)(iv) of the
Federal Reserve Act

PART A: DISCLOSURE STATEMENT, INSTRUCTIONS AND NOTICE TO DEBTOR

1. DISCLOSURE STATEMENT

Before Agreeing to Reaffirm a Debt, Review These Important Disclosures:

SUMMARY OF REAFFIRMATION AGREEMENT

This Summary is made pursuant to the requirements of the Bankruptcy Code.

AMOUNT REAFFIRMED

The amount of debt you have agreed to reaffirm:

25% contingency fee of award
being pursued against Social
S Security Administration, up
to \$6,000

***The amount of debt you have agreed to reaffirm includes all fees and costs (if any) that have
accrued as of the date of this disclosure. Your credit agreement may obligate you to pay additional
amounts which may come due after the date of this disclosure. Consult your credit agreement.***

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ANNUAL PERCENTAGE RATE*[The annual percentage rate can be disclosed in different ways, depending on the type of debt.]*

a. If the debt is an extension of "credit" under an "open end credit plan," as those terms are defined in § 103 of the Truth in Lending Act, such as a credit card, the creditor may disclose the annual percentage rate shown in (i) below or, to the extent this rate is not readily available or not applicable, the simple interest rate shown in (ii) below, or both.

(i) The Annual Percentage Rate disclosed, or that would have been disclosed, to the debtor in the most recent periodic statement prior to entering into the reaffirmation agreement described in Part B below or, if no such periodic statement was given to the debtor during the prior six months, the annual percentage rate as it would have been so disclosed at the time of the disclosure statement: 0.00 %.

--- And/Or ---

(ii) The simple interest rate applicable to the amount reaffirmed as of the date this disclosure statement is given to the debtor: _____%. If different simple interest rates apply to different balances included in the amount reaffirmed, the amount of each balance and the rate applicable to it are:

\$ _____ @ _____ %;
 \$ _____ @ _____ %;
 \$ _____ @ _____ %.

b. If the debt is an extension of credit other than under than an open end credit plan, the creditor may disclose the annual percentage rate shown in (i) below, or, to the extent this rate is not readily available or not applicable, the simple interest rate shown in (ii) below, or both.

(i) The Annual Percentage Rate under § 128(a)(4) of the Truth in Lending Act, as disclosed to the debtor in the most recent disclosure statement given to the debtor prior to entering into the reaffirmation agreement with respect to the debt or, if no such disclosure statement was given to the debtor, the annual percentage rate as it would have been so disclosed: 0.00 %.

--- And/Or ---

(ii) The simple interest rate applicable to the amount reaffirmed as of the date this disclosure statement is given to the debtor: 0.00 %. If different simple interest rates apply to different balances included in the amount reaffirmed, the amount of each balance and the rate applicable to it are:

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\$ _____ @ _____ %;
 \$ _____ @ _____ %;
 \$ _____ @ _____ %.

c. If the underlying debt transaction was disclosed as a variable rate transaction on the most recent disclosure given under the Truth in Lending Act:

The interest rate on your loan may be a variable interest rate which changes from time to time, so that the annual percentage rate disclosed here may be higher or lower.

d. If the reaffirmed debt is secured by a security interest or lien, which has not been waived or determined to be void by a final order of the court, the following items or types of items of the debtor's goods or property remain subject to such security interest or lien in connection with the debt or debts being reaffirmed in the reaffirmation agreement described in Part B.

Item or Type of Item

Original Purchase Price or Original Amount of Loan

Optional---At the election of the creditor, a repayment schedule using one or a combination of the following may be provided:

Repayment Schedule:

Your first payment in the amount of \$ _____ is due on _____ (date), but the future payment amount may be different. Consult your reaffirmation agreement or credit agreement, as applicable.

— Or —

Your payment schedule will be: _____ (number) payments in the amount of \$ _____ each, payable (monthly, annually, weekly, etc.) on the _____ (day) of each _____ (week, month, etc.), unless altered later by mutual agreement in writing.

— Or —

A reasonably specific description of the debtor's repayment obligations to the extent known by the creditor or creditor's representative. Debtor shall pay Creditor 1/3rd contingency upon successful outcome of case against Social Security Administration.

2. INSTRUCTIONS AND NOTICE TO DEBTOR

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Reaffirming a debt is a serious financial decision. The law requires you to take certain steps to make sure the decision is in your best interest. If these steps are not completed, the reaffirmation agreement is not effective, even though you have signed it.

1. Read the disclosures in this Part A carefully. Consider the decision to reaffirm carefully. Then, if you want to reaffirm, sign the reaffirmation agreement in Part B (or you may use a separate agreement you and your creditor agree on).
2. Complete and sign Part D and be sure you can afford to make the payments you are agreeing to make and have received a copy of the disclosure statement and a completed and signed reaffirmation agreement.
3. If you were represented by an attorney during the negotiation of your reaffirmation agreement, the attorney must have signed the certification in Part C.
4. If you were not represented by an attorney during the negotiation of your reaffirmation agreement, you must have completed and signed Part E.
5. The original of this disclosure must be filed with the court by you or your creditor. If a separate reaffirmation agreement (other than the one in Part B) has been signed, it must be attached.
6. If the creditor is not a Credit Union and you were represented by an attorney during the negotiation of your reaffirmation agreement, your reaffirmation agreement becomes effective upon filing with the court unless the reaffirmation is presumed to be an undue hardship as explained in Part D. If the creditor is a Credit Union and you were represented by an attorney during the negotiation of your reaffirmation agreement, your reaffirmation agreement becomes effective upon filing with the court.
7. If you were not represented by an attorney during the negotiation of your reaffirmation agreement, it will not be effective unless the court approves it. The court will notify you and the creditor of the hearing on your reaffirmation agreement. You must attend this hearing in bankruptcy court where the judge will review your reaffirmation agreement. The bankruptcy court must approve your reaffirmation agreement as consistent with your best interests, except that no court approval is required if your reaffirmation agreement is for a consumer debt secured by a mortgage, deed of trust, security deed, or other lien on your real property, like your home.

YOUR RIGHT TO RESCIND (CANCEL) YOUR REAFFIRMATION AGREEMENT

You may rescind (cancel) your reaffirmation agreement at any time before the bankruptcy court enters a discharge order, or before the expiration of the 60-day period that begins on the date your reaffirmation agreement is filed with the court, whichever occurs later. To rescind (cancel) your reaffirmation agreement, you must notify the creditor that your reaffirmation agreement is rescinded (or canceled).

Frequently Asked Questions:

What are your obligations if you reaffirm the debt? A reaffirmed debt remains your personal legal obligation. It is not discharged in your bankruptcy case. That means that if you default on your reaffirmed debt after your bankruptcy case is over, your creditor may be able to take your property or your wages. Otherwise, your obligations will be determined by the reaffirmation agreement which may have changed the terms of the original agreement. For example, if you are reaffirming an open end credit agreement, the creditor may be permitted by that agreement or applicable law to change the terms of that agreement in the future under certain conditions.

Are you required to enter into a reaffirmation agreement by any law? No, you are not required to reaffirm a debt by any law. Only agree to reaffirm a debt if it is in your best interest. Be sure you can afford the payments you agree to make.

What if your creditor has a security interest or lien? Your bankruptcy discharge does not eliminate any lien on your property. A "lien" is often referred to as a security interest, deed of trust, mortgage or security deed. Even if you do not reaffirm and your personal liability on the debt is discharged, because of the lien your creditor may still have the right to take the property securing the lien if you do not pay the debt or default on it. If the lien is on an item of personal property that is exempt under your State's law or that the trustee has abandoned, you may be able to redeem the item rather than reaffirm the debt. To redeem, you must make a single payment to the creditor equal to the amount of the allowed secured claim, as agreed by the parties or determined by the court.

NOTE: When this disclosure refers to what a creditor "may" do, it does not use the word "may" to give the creditor specific permission. The word "may" is used to tell you what might occur if the law permits the creditor to take the action. If you have questions about your reaffirming a debt or what the law requires, consult with the attorney who helped you negotiate this agreement reaffirming a debt. If you don't have an attorney helping you, the judge will explain the effect of your reaffirming a debt when the hearing on the reaffirmation agreement is held.

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PART B: REAFFIRMATION AGREEMENT.

I (we) agree to reaffirm the debts arising under the credit agreement described below.

1. Brief description of credit agreement:

The obligation reaffirmed is the 25% contingency fee (up to a maximum of \$6,000) due to Wyskiel, Boc, Tillinghast & Bolduc, P.A. upon successful appeal of Social Security Administration's denial of benefits, which as of the petition date, the benefit is believed to be \$48,000.

2. Description of any changes to the credit agreement made as part of this reaffirmation agreement:

SIGNATURE(S):

Borrower:

Samuel Ostroff

(Print Name)

(Signature)

Date: 5/15/2018

Co-borrower, if also reaffirming these debts:

(Print Name)

(Signature)

Date: _____

Accepted by creditor:

Wyskiel, Boc, Tillinghast & Bolduc, P.A.

(Printed Name of Creditor)

561 Central Ave., Dover, NH 03820

(Address of Creditor)

(Signature)

D. Lance Tillinghast, Esq.

(Printed Name and Title of Individual
Signing for Creditor)

Date of creditor acceptance:

May 10, 2018

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PART C: CERTIFICATION BY DEBTOR'S ATTORNEY (IF ANY).

[To be filed only if the attorney represented the debtor during the course of negotiating this agreement.]

I hereby certify that (1) this agreement represents a fully informed and voluntary agreement by the debtor; (2) this agreement does not impose an undue hardship on the debtor or any dependent of the debtor; and (3) I have fully advised the debtor of the legal effect and consequences of this agreement and any default under this agreement.

☐ *[Check box, if applicable and the creditor is not a Credit Union.]* A presumption of undue hardship has been established with respect to this agreement. In my opinion, however, the debtor is able to make the required payment.

Printed Name of Debtor's Attorney: Ryan M. Borden, Esq.

Signature of Debtor's Attorney: 

Date: 5/18/18

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PART D: DEBTOR'S STATEMENT IN SUPPORT OF REAFFIRMATION AGREEMENT

*[Read and complete sections 1 and 2, **OR**, if the creditor is a Credit Union and the debtor is represented by an attorney, read section 3. Sign the appropriate signature line(s) and date your signature. If you complete sections 1 and 2 **and** your income less monthly expenses does not leave enough to make the payments under this reaffirmation agreement, check the box at the top of page 1 indicating "Presumption of Undue Hardship." Otherwise, check the box at the top of page 1 indicating "No Presumption of Undue Hardship"]*

1. I believe this reaffirmation agreement will not impose an undue hardship on my dependents or me. I can afford to make the payments on the reaffirmed debt because my monthly income (take home pay plus any other income received) is \$ 6,238.80, and my actual current monthly expenses including monthly payments on post-bankruptcy debt and other reaffirmation agreements total \$ 4716.08, leaving \$ 1,522.72 to make the required payments on this reaffirmed debt.

I understand that if my income less my monthly expenses does not leave enough to make the payments, this reaffirmation agreement is presumed to be an undue hardship on me and must be reviewed by the court. However, this presumption may be overcome if I explain to the satisfaction of the court how I can afford to make the payments here: _____

(Use an additional page if needed for a full explanation.)

2. I received a copy of the Reaffirmation Disclosure Statement in Part A and a completed and signed reaffirmation agreement.

Signed: _____
(Debtor)

(Joint Debtor, if any)
Date: 5/15/2018

— Or —

[If the creditor is a Credit Union and the debtor is represented by an attorney]

3. I believe this reaffirmation agreement is in my financial interest. I can afford to make the payments on the reaffirmed debt. I received a copy of the Reaffirmation Disclosure Statement in Part A and a completed and signed reaffirmation agreement.

Signed: _____
(Debtor)

(Joint Debtor, if any)
Date: _____

TWO-TIERED FEE AGREEMENT - SOCIAL SECURITY DISABILITY/SSI

ATTORNEY FEES: I employ Wyskiel, Boc, Tillinghast & Bolduc, P.A. (the "Firm") to represent me before the Social Security Administration (SSA) in my disability case. If I win at any administrative level through the first administrative law judge (ALJ) decision after the date of this agreement, I agree that the attorney fee will be the lesser of twenty-five percent (25%) of all past-due benefits awarded to my family and me, or the dollar amount established pursuant to 42 U.S.C. §406(a)(2)(A), which is currently \$6,000, but may be increased from time to time by the Commissioner of Social Security. I understand that my attorney has the right to seek administrative review to increase the amount of the fee set under the preceding sentence of this agreement; but if that happens, my attorney will not ask for a fee of more than 25% of total back benefits awarded in my case. If the first ALJ decision after the date of this agreement is a denial and my attorney agrees to appeal and I win my case later, my attorney will ask SSA to approve a fee no greater than twenty-five percent (25%) of all back benefits awarded in my case. If I receive both Social Security disability and SSI benefits, I understand that my total fee will not be more than 25% of all past-due benefits, or no more than the limit set by 42 U.S.C. §406(a)(2)(A), if the limit applies. I understand that if I do not win benefits, then the attorneys get no fee.

SCOPE OF REPRESENTATION: I have employed my attorneys to represent me in my Social Security disability and/or SSI claim, including all post-decision effectuation. I understand that my attorneys do not represent me in any other public or private claim related to my disability, or with any other government agency or any insurance company unless separate arrangements, including a separate contract, have been made for representation on any other claim.

ASSIGNMENT EAJA ATTORNEY'S FEES: If my claim is denied and all administrative remedies have been exhausted, I understand that you may decide to appeal my case to a federal court by filing a complaint to have the final decision rendered by the Commissioner of Social Security reviewed. If such a complaint is filed, you may petition the court for fees under the Equal Access to Justice Act, 28 U.S.C. §2412 ("EAJA") and the court may grant such fees. If such fees are awarded, I hereby assign any and all rights to any attorney fees payable under EAJA to the firm and/or the undersigned attorney(s), and hereby consent to the payment of those fees directly to them. If a court awards me fees under EAJA, I assign them to the undersigned attorney(s) and authorize them to endorse my name on the checks paying them.

LIMITED POWER OF ATTORNEY TO CONVEY EAJA AWARD: I authorize the Firm and/or the undersigned attorney(s) to seek attorneys' fees under EAJA, either on my behalf or on behalf of the Firm and/or the undersigned attorney(s). I agree to pay the Firm and the undersigned attorney(s) all attorneys' fees awarded me under EAJA. I agree that EAJA fees may be mailed to or made payable to the firm and/or the undersigned attorney(s) directly, and I assign all rights I have to seek and receive them to the Firm and/or the undersigned attorney(s). I authorize the firm and/or the undersigned attorney(s) to sign my name to any check issued to me for EAJA fees, and agree to immediately deliver any check I receive for EAJA fees to the Firm and/or the undersigned attorney(s). I understand that if the Firm and/or the undersigned attorney(s) receives fees from my benefits and from EAJA for the same work, the Firm and/or the undersigned attorney(s) will refund the lower fee to me.

PAYMENT OF ATTORNEY FEES: I understand that SSA will hold out money from my past-due benefits and pay my attorneys for their work on my case unless my attorneys waive withholding and direct payment. If SSA does not withhold and pay all approved attorney fees, I will pay them promptly.

I WILL PAY EXPENSES: In addition to fees, I agree to pay my attorneys for reasonable expenses that they pay in my case. These may include medical records and reports, photocopying, travel expenses, transcript preparation, and the like. I will get a bill for expenses that shows how and when my attorneys spent the money. In a case in which I get benefits, I agree to pay my attorneys back for these expenses as soon as I get a check for back benefits. I agree to pay expenses whether we win or lose.

I HAVE NOT BEEN PROMISED THAT I WILL WIN: My attorneys promised that they will do their best to help me. They did not promise me that I will win.

I accept and approve this agreement:


D. Lance Tillinghast, Esq.

Date: 12/2/17


Claimant's Signature

Samuel Ostroff
Claimant's Name


Social Security Number